

Application Data Sheet

Application Information

Application number:: 09/485,193
Filing Date:: 06/03/99
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??::
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: USE OF PROTHYMOSIN IN THE DIAGNOSIS
AND TREATMENT OF ENDOMETRIOSIS
Attorney Docket Number:: 018002-001010US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets::
Small Entity?:: Yes
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Patrick
Middle Name:: A.
Family Name:: Schneider
Name Suffix::
City of Residence:: Temecula
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 33120 Vino Way
City of Mailing Address:: Temecula
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 92591

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Cynthia
Middle Name:: K.
Family Name:: French
Name Suffix::
City of Residence:: Irvine
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 14 Virgil Court
City of Mailing Address:: Irvine
State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 92612

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Karen
Middle Name:: K.
Family Name:: Yamamoto
Name Suffix::
City of Residence:: San Clemente
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 48 Chapital
City of Mailing Address:: San Clemente
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 92672

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Designation:: Representative Number:: Representative Name::
Primary 37,505 Joe Liebeschuetz

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application PCT/US99/12336	National Stage of Non-Provisional of	PCT/US99/12336 60/088,016	06/03/99 06/04/98

Foreign Priority Information

Country::	Application number::	Filing Date::
PCT	PCT/US99/12336	06/03/99

Assignee Information

Assignee Name::	Reprogen, Inc.
Street of mailing address::	650 Town Center, Suite 810
City of mailing address::	Costa Mesa
State or Province of mailing address::	CA
Country of mailing address::	US
Postal or Zip Code of mailing address::	92626